CENTRAL RECORDKE PING AGENCY PRINCIPAL ACCOUNTS OFFICE REGISTRATION FORM (To avoid mistake(s), please read the accompanying instructions carefully before filling up the form) (s form is to be used for the purpose of registration of Principal Accounts Office (Pr.AO) and equivalent entities in Central C instructs? Railway / Post / Telecom / Civil bepres. Pr.AO Registration Number: (To be allotted by CRA) We are pleased to inform you that our Principal Accounts Office has decided to join the National Pension System. The details required for registration in the CRA systemare provided below: 1. Pr.AO AIN (Optional): 2. Are you a Pr.AO cum PAO*: (Please Tick) Yes No (Refer to instruction No. 10) 3. Principal Accounts Office Type*: (Please Tick) Civil Postal Telecom Railways Defence 4. Fasting Principal Accounts Office Code*: (Allotted by CGA/Respective Accounting Pormations) 5. Name of the Principal Accounts Office Code*: (Allotted by CGA/Respective Accounting Pormations) 5. Name of the Principal Accounts Office Code*: (STD code) (Phone No.) Alternate Phone No. Phone No. (STD code) (Phone No.) Alternate Phone No: (STD code) (Phone No.) Alternate Phone No: (STD code) (Phone No.) 8. Authorized contact person's Designation *:	Annexure NI	~=				~~:				~~~	·~			~						Pag	<u>e 1</u>	
To avoid mistake(s), please read the accompanying instructions carefully before filling up the form) is form is to be used for the purpose of registration of Principal Accounts Office (Pr.AO) and equivalent entities in Central C nistries/Railway/Post/Telecom/Civil Defence. Pr.AO Registration Number: (To be allotted by CRA) We are pleased to inform you that our Principal Accounts Office has decided to join the National Pension System. The details required for registration in the CRA systemare provided below: 1. Pr.AO AIN (Optional): (Refer to instruction No.5) 2. Are you a Pr.AO cum PAO*: (Please Tick) Yes																						
is form is to be used for the purpose of registration of Principal Accounts Office (PrAO) and equivalent entities in Central Cnistries/Railway/Post/Telecom/Civil Defence Pr.AO Registration Number: (To be allotted by CRA) We are pleased to inform you that our Principal Accounts Office has decided to join the National Pension System. The details required for registration in the CRA systemare provided below: 1. Pr.AO AIN (Optional): 2. Are you a Pr.AO cum PAO*: (Please Tick) Yes No (Refer to instruction No. 10) 3. Principal Accounts Office Type*: (Please Tick) Civil Postal Telecom Railways Defence 4. Existing Principal Accounts Office Code*: (Allotted by CGA/Respective Accounting Formations) 5. Name of the Principal Accounts Office Address*: Flat/Unit No, Block no. * Plat/Unit No, Block no. * State / Union Territory * District/Town/City *																						
Me are pleased to inform you that our Principal Accounts Office has decided to join the National Pension System. The details required for registration in the CRA systemare provided below: 1. Pr.AO AIN (Optional): 2. Are you a Pr.AO cum PAO*: (Please Tick) Yes No (Refer to instruction No. 10) 3. Principal Accounts Office Type*: (Please Tick) Civil Postal Telecom Railways Defence 4. Existing Principal Accounts Office Code*: (Allotted by CGA/Respective Accounting Formations) 5. Name of the Principal Accounts Office Address*: Patribin No. Block no.* Patribin No. Block no.* Patribin No. Block no.*																						
Pr.AO Registration Number: (To be allotted by CRA) We are pleased to inform you that our Principal Accounts Office has decided to join the National Pension System. The details required for registration in the CRA systemare provided below: 1. Pr.AO AIN (Optional): (Pr.AO AIN (Optional): (Please Tick) Yes					n of	Princ	ipal	Acce	ount	s O	ffice	(Pr.	AO)	and	equ	ivale	ent e	ntiti	es i	n Ce	ntra	l C
We are pleased to inform you that our Principal Accounts Office has decided to join the National Pension System. The details required for registration in the CRA systemare provided below: 1. Pr.AO AIN (Optional):	nistries / Railway / Post / Tele	ecom/Civ	ril Defe	nce.																		
We are pleased to inform you that our Principal Accounts Office has decided to join the National Pension System. The details required for registration in the CRA systemare provided below: 1. Pr.AO AIN (Optional):									-													
We are pleased to inform you that our Principal Accounts Office has decided to join the National Pension System. The details required for registration in the CRA systemare provided below: 1. Pr.AO AIN (Optional):					r :																	
required for registration in the CRA systemare provided below: 1. Pr.AO AIN (Optional):	(T	o be allott	ed by C	CRA)																		
2. Are you a Pr.AO cum PAO*: (Please Tick) Yes No (Refer to instruction No. 10) 3. Principal Accounts Office Type*: (Please Tick) Civil Postal Telecom Railways Defence (Allotted by CGA/Respective Accounting Formations) 5. Name of the Principal Accounts Office Address*: Flat/Unit No, Block no.* Name of Premise/Building/Village Name of Pr									dec	ided	l to jo	oin t	he N	latio	nal P	ensi	on S	yste	т. Т	Γhe d	etail	s
3. Principal Accounts Office Type*: (Please Tick) Civil Postal Telecom Railways Defence 4. Existing Principal Accounts Office Code*: (Allotted by CGA/Respective Accounting Formations) 5. Name of the Principal Accounts Office* 6. Principal Accounts office Address*: Flat/Unit No, Block no.* Name of Premise/Building/Village Area/Locality/Taluka District/Town/City * State / Union Territory * Country * Pin Code * Phone No. * (STD code) (Phone No.) Alternate Phone No: Fax No: 7. Official Email ID* (Refer to instruction No.6)	1. Pr.AO AIN (Optional):							(Re	efer	to i	nstru	ıctio	n No	0.5)								
Civil Postal Telecom Railways Defence 4. Existing Principal Accounts Office Code*: (Allotted by CGA/Respective Accounting Formations) 5. Name of the Principal Accounts Office* 6. Principal Accounts office Address*: Flat/Unit No, Block no.* Name of Premise/Building/Village	2. Are you a Pr.AO cum Pa	AO*: (Plea	ase Ticl	k) Yes	s [No] (F	Refe	r to i	instr	uctio	on No	o. 10)						
4. Existing Principal Accounts Office Code*: (Allotted by CGA/Respective Accounting Formations) 5. Name of the Principal Accounts Office Address*: Flat/Unit No, Block no.* Name of Premise/Building/Village	3. Principal Accounts Office	ce Type*:	(Please	e Tick))																	
5. Name of the Principal Accounts Office* 6. Principal Accounts office Address*: Flat/Unit No, Block no.* Name of Premise/Building/Village Area/Locality/Taluka District/Town/City * State / Union Territory * Country * Pin Code * Phone No. * (STD code) (Phone No.) Alternate Phone No: Fax No: 7. Official Email ID* (Refer to instruction No.6)	Civil Postal		Teleco	m [Rail	ways	s		Ι	Defer	ice										
Accounts Office* 6. Principal Accounts office Address*: Flat/Unit No, Block no. * Name of Premise/Building/Village Area/Locality/Taluka District/Town/City * State / Union Territory * Country * Pin Code * Phone No. * (STD code) (Phone No.) Alternate Phone No: Fax No: 7. Official Email ID* (Refer to instruction No.6)	4. Existing Principal Accordance	unts Office	e Code ³	*:						Allo	tted	by (CGA	/Res	pect	ive A	Acco	ounti	ng F	Forma	ation	ıs)
Accounts Office* 6. Principal Accounts office Address*: Flat/Unit No, Block no. * Name of Premise/Building/Village Area/Locality/Taluka District/Town/City * State / Union Territory * Country * Pin Code * Phone No. * (STD code) (Phone No.) Alternate Phone No: Fax No: 7. Official Email ID* (Refer to instruction No.6)							ı	1 1	_				1									$\overline{}$
Accounts Office* 6. Principal Accounts office Address*: Flat/Unit No, Block no. * Name of Premise/Building/Village Area/Locality/Taluka District/Town/City * State / Union Territory * Country * Pin Code * Phone No. * (STD code) (Phone No.) Alternate Phone No: Fax No: 7. Official Email ID* (Refer to instruction No.6)	5. Name of the Principal		\vdash			\perp	-	\bot	_	\perp	_	1	-		\perp	_	1	$\vdash \vdash$	_		-	+
6. Principal Accounts office Address*: Flat/Unit No, Block no.* Name of Premise/Building/Village Area/Locality/Taluka District/Town/City * State / Union Territory * Country * Pin Code * Phone No. * (STD code) (Phone No.) Alternate Phone No: Fax No: 7. Official Email ID* (Refer to instruction No.6)											_						1				_	4
Flat/Unit No, Block no. *																						丄
Name of Premise/Building/Village Area/Locality/Taluka District/Town/City * State / Union Territory * Country * Pin Code * Phone No. * (STD code) (Phone No.) Alternate Phone No: Fax No: 7. Official Email ID* (Refer to instruction No.6)			s*:																			
Area/Locality/Taluka District/Town/City * Country * Pin Code * Phone No. * (STD code) (Phone No.) Alternate Phone No: Fax No: 7. Official Email ID* (Refer to instruction No.6)																						T
Area/Locality/Taluka District/Town/City * State / Union Territory * Country * Pin Code * Phone No. * (STD code) (Phone No.) Alternate Phone No: Fax No: 7. Official Email ID* (Refer to instruction No.6)	Name of Premise/Buildi	ng/Village	<u> </u>			ı	-		-				- 1	ı	- 1	1	1	1	1	1		
District/Town/City * State / Union Territory * Country * Pin Code * Phone No. * (STD code) (Phone No.) Alternate Phone No: Fax No: 7. Official Email ID* (Refer to instruction No.6)																						T
District/Town/City * State / Union Territory * Country * Pin Code * Phone No. * (STD code) (Phone No.) Alternate Phone No: Fax No: 7. Official Email ID* (Refer to instruction No.6)	Area/Locality/Taluka		1 1									- 1	1									
State / Union Territory * Country * Pin Code * Phone No. * (STD code) (Phone No.) Alternate Phone No: Fax No: 7. Official Email ID* (Refer to instruction No.6)																				T		T
State / Union Territory * Country * Pin Code * Phone No. * (STD code) (Phone No.) Alternate Phone No: Fax No: 7. Official Email ID* (Refer to instruction No.6)	District/Town/City *			1			l				- 1	<u> </u>	- 1								<u> </u>	<u></u>
Country * Pin Code * (STD code) (Phone No.) Alternate Phone No: Fax No: 7. Official Email ID* (Refer to instruction No.6)	District/Town/City																T					Т
Country * Pin Code * STD code) (Phone No.) Alternate Phone No: Fax No: 7. Official Email ID* (Refer to instruction No.6)	State / Union Tarritory	*																				<u> </u>
Pin Code * Phone No. *	State / Union Territory	··		1 1					1			1				1	1	1	1	1	1	т —
Pin Code * Phone No. *																						
Phone No. * (STD code) (Phone No.) Alternate Phone No: Fax No: 7. Official Email ID* (Refer to instruction No.6)	Country *	1 1	1 1	1				ı										1	1		1	_
Phone No. * (STD code) (Phone No.) Alternate Phone No: Fax No: 7. Official Email ID* (Refer to instruction No.6)																						L_
(STD code) (Phone No.) Alternate Phone No: Fax No: 7. Official Email ID* (Refer to instruction No.6)	Pin Code *	751																				
Alternate Phone No: Fax No: 7. Official Email ID* (Refer to instruction No.6)		Ph	ione No). *																		
Alternate Phone No: Fax No: 7. Official Email ID* (Refer to instruction No.6)		(STD	code	e)			(Pho	ne N	lo.)											
Fax No: 7. Official Email ID* (Refer to instruction No.6)					_	(~		-,		_		(,								
7. Official Email ID* (Refer to instruction No.6)	Alternate Phone No:																					
7. Official Email ID* (Refer to instruction No.6)																		_				
	Fax No:				Γ					∐ [
					_											•						
8. Authorized contact person's Designation *:	7. Official Email ID* (Refe	er to instru	action N	lo.6)																		7
8. Authorized contact person's Designation *:																						
8. Authorized contact person's Designation*:					T	T				$oldsymbol{ol}}}}}}}}}}}}}} $			[\bot						l
8. Authorized contact person's Designation *:																						
	8. Authorized contact pers	on's Desig	gnation	*:																		
																						1
				1 1				1		1		1	1	1						1		1
		+ + -		1 1			\top	\top		\top		+	+	+	1	1	1	1		1		1
									1							1	<u> </u>	1		·		<u>. </u>
	9 No of PAOs attached*																					
9. No. of PAOs attached*:																						
9. No. of PAOs attached*: (Refer to instruction No. 7 and 10)	,10101 00 1110 11 10 11 11 11 11 11 11 11																					

Principal accounts office stamp & signature of authorised signatory

Ann	exure	<u>N1</u>																	Page 2	2
10.	Minis	tries b	eing c	urrentl	y serv	ed by 1	Pr.AO*	(Refe	r to in	struct	ion No	. 8):								
i)																				
ii)															1					
11)																				
		1	1	1						1		1	1	1		1			1	ı
iii)																				
															1					
iv)																				
v)					1				1						1					
٧)																				
I/W e	herel	y agr	ee and	declar	e that	the inf	ormatio	n pro	ovided	in the	applic	ation,	is cor	nplete	and tr	ue.	1	1	1	
use of	of I-Pi under	<i>in (to</i> stand	view a	nd tra RA m	<i>nsact</i> ay, as	online appro	RDA ap	cess (CRA/	NPSC	<i>AN</i> . I/	We ag	ree to	be bo	und by	the sa	aid terr	ns and	condi	tions
									Signature of Authorised Signatory											
								Na	Name: Place:											
 Pr	 incine	al Acc	ounts	Office	Stam			De	signat	tion: _]	Date:					
	тистра	11 /100	ounts	Omec	. Duain	Ψ														_
											Receiv	ed on	ı					_		
											Name	of the	office	er:				_		
											Signat	ure o	f the o	fficer	:					

Instructions for filling the form:

(To be filled at CRA)

- 1. The form is to be submitted to the address Central Recordkeeping Agency, Protean eGov Technologies Limited (formerly NSDL e-Governance Infrastructure Limited), Times Tower, 1st Floor, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel (W), Mumbai 400013.
- 2. Form to be filled legibly in BLOCK LETTERS and in BLACK INK only.

CRA Stamp

- 3. The form should be filled up completely. Details marked with (*) are mandatory fields.
- 4. Each box, wherever provided, should contain only one character (alphabet/number/punctuation mark) leaving a blank box after each word.
- 5. AIN is Account Office Identification Number allotted by Income Tax Department.
- 6. Email ID should be official Email ID of the Principal Accounts Office at any of Government of India or similar website & not of any individual person or non government website like yahoo.com and rediffmail.com.
- 7. Kindly mention the total number of PAOs attached to the Principal Accounts Office and also attach the list of PAOs on official stationary giving details of PAO Code, PAO Name and Ministry name of the PAO.
- 8. In case of additional ministries, please provide an annexure to the form mentioning the details of the additional ministries.
- 9. The application form in the format prescribed by PFRDA (Pension Fund Regulatory & Development Authority) can be freely downloaded from the CRA website (http://www.npscra.nsdl.co.in).
- 10. If you function as PrAO cum PAO, kindly submit Form N2 (PAO registration form) also for registration as a PAO.
- 11. For more information contact CRA at 022-24994200 or write to CRA at Protean eGov Technologies Limited (formerly NSDL e-Governance Infrastructure Limited), Times Tower, 1st Floor, Kamala Mills Compound, Senapati Bapat Marg, Lower Parel (W), Mumbai 400013.